

Docket No. 1784/53661-AA/JPW/BJA/LCMIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Stewart Shuman, et al.  
Serial No. : 10/666,486 Examiner: N. Bhat  
Filed : September 19, 2003 Group Art Unit: 1634  
For : TOPOISOMERASE BASED REAGENTS AND METHODS FOR  
MOLECULAR CLONING

Mail Stop Amendment  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Date: October 6, 2008

Sir:

Transmitted herewith is an amendment to the above-identified application.

\_\_\_\_\_ Small entity status of this application under 37 C.F.R. \$1.9 and \$1.27 has been previously established.

\_\_\_\_\_ A verified statement to establish small entity status under 37 C.F.R. \$1.9 and \$1.27 is enclosed.

\_\_\_\_\_ No additional fee is required.

The filing fee is calculated as follows:

	Number after Amend-ment	Highest Number Previously Paid For <sup>1</sup>	Number of Extra Claims Presented	RATE			FEE	
				Small Entity	Other Entity		Small Entity	Other Entity
Total Claims	21 -	* 23 =	*** 0 X	\$25	\$50	=		0
Indepen- -dent Claims	2 -	** 5 =	*** 0 X	\$105	\$210	=		0
Multiple Dependent Claim(s) Presented For First Time _____ Yes _____ No <input checked="" type="checkbox"/>				\$185	\$370	=		0
				TOTAL ADDITIONAL FEE			\$ 0.00	

<sup>1</sup> The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

\*\*\* If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

Amendment Transmittal Letter  
Page 2

The following are also enclosed:

One additional copy of this Amendment Transmittal Letter

X Return Receipt Postcard

An Information Disclosure Statement, including Form PTO-1449

(Copies of citations included: Yes No

and a fee of \$                      included)

X A Petition for an Extension of Time, including a fee of  
\$ 490.00 for a Petition for 2 Month(s) Extension of Time

Other (identify): \_\_\_\_\_

THE TOTAL FEE DUE IS \$ 490.00

X A check in the amount of \$ 490.00 is enclosed.

\_\_\_\_\_ Please charge Deposit Account No. \_\_\_\_\_ in the amount of  
\$ \_\_\_\_\_.

X The Commissioner is hereby authorized to charge any additional fees required or credit any overpayment to Deposit Account No. 03-3125 as follows:

<u>X</u>	Fees under 37 C.F.R. \$1.16 for the presentation of extra claims Patent application processing fees under 37 C.F.R. \$1.17
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Respectfully submitted,

I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to:

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

John P. White  
Reg. No. 28,678

Date \_\_\_\_\_

John P. White

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